

ORDER FOR SUPPLIES OR SERVICES										Page 1 Of 4		
<b>1. Contract/Purch Order/Agreement No.</b>  GS28F0025J			<b>2. Delivery Order/Call No.</b>  DAAE20-02-F-0047		<b>3. Date Of Order/Call (YYYYMMDD)</b>  2002SEP27		<b>4. Requisition/Purch Request No.</b>  SEE SCHEDULE		<b>5. Priority</b>  DOA5			
<b>6. Issued By</b> TACOM-ROCK ISLAND AMSTA-LC-CTR-E WANNETTA BAKER (309)782-4905 ROCK ISLAND IL 61299-7630  EMAIL: BAKERW@RIA.ARMY.MIL				<b>Code</b> W52H09		<b>7. Administered By (If other than 6)</b> PR TACOM-RI ATTN FIN AND ACCT OFC ROCK ISLAND IL 61299-6000			<b>Code</b> W52H09			
<b>9. Contractor</b>  • GLOBAL DISTRIBUTORS INC 4901 FAIRMONT AVE BETHESDA MD 20814-6000  <b>Name and Address</b>  •  •  TYPE BUSINESS: Other Small Business Performing in U.S.				<b>Facility</b>  •		<b>10. Deliver To FOB Point By (Date) (YYYYMMDD)</b>  SEE SCHEDULE			<b>8. Delivery FOB</b>  <input type="checkbox"/> Destination <input checked="" type="checkbox"/> Other  (See Schedule if other)			
						<b>12. Discount Terms</b>						
						<b>13. Mail Invoices To the Address in Block</b> See Block 15						
<b>14. Ship To</b> SEE SCHEDULE				<b>Code</b>		<b>15. Payment Will Be Made By</b> DFAS ST LOUIS ATT DFAS-SL-FPV 4300 GOODFELLOW BLVD BLDG 110 PO BOX 200009 ST LOUIS MO 63120-0009			<b>Code</b> HQ0304			
<b>16. Type of Order</b>  <div style="display: flex; align-items: center;"><div style="flex: 1;">Delivery/Call</div><div style="flex: 1; text-align: center;">X</div></div>  <div style="display: flex; align-items: center;"><div style="flex: 1;">Purchase</div><div style="flex: 1; text-align: center;">X</div></div>				<b>This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.</b>								
				<b>Reference your <input type="checkbox"/> Oral; <input type="checkbox"/> Written Quotation, Dated</b>								
				<b>furnish the following on terms specified herein.</b>								
<b>Acceptance. The Contractor Hereby Accepts The Offer Represented By The Numbered Purchase Order As It May Previously Have Been Or Is Now Modified, Subject To All Of The Terms And Conditions Set Forth, And Agrees To Perform The Same.</b>												
<b>Name Of Contractor</b>				<b>Signature</b>		<b>Typed Name And Title</b>		<b>Date Signed (YYYYMMDD)</b>				
<input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:												
<b>17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE</b> SEE SCHEDULE												
<b>18. Item No.</b>		<b>19. Schedule Of Supplies/Service</b> SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price			<b>20. Quantity Ordered/ Accepted*</b>		<b>21. Unit</b>		<b>22. Unit Price</b>		<b>23. Amount</b>	
		KIND OF CONTRACT: Supply Contracts and Priced Orders										
<b>* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.</b>					<b>24. United States Of America</b>					<b>25. Total</b> \$6,376.14		
<b>26. Quantity In Column 20 Has Been</b>  <input type="checkbox"/> Inspected <input type="checkbox"/> Received <input type="checkbox"/> Accepted And Conforms To Contract Except As Noted  _____ Date Signature Of Authorized Govt Representative  <b>36. I certify this account is correct and proper for payment</b>  _____ Date Signature And Title Of Certifying Officer					<b>By:</b> HOWARD LEWIS /SIGNED/ LEWISH@RIA.ARMY.MIL (309)782-3506					<b>Contracting/Ordering Officer</b>		
					<b>27. Ship. No.</b>		<b>28. D.O. Voucher No.</b>		<b>30. Initials</b>		<b>29. Differences</b>	
					<input type="checkbox"/> Partial <input type="checkbox"/> Final		<b>32. Paid By</b>		<b>33. Amount Verified Correct For</b>		<b>34. Check Number</b>	
<b>31. Payment</b>  <input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final												
<b>37. Received At</b>		<b>38. Received By</b>		<b>39. Date Received</b>		<b>40. Total Containers</b>		<b>41. S/R Account Number</b>		<b>42. S/R Voucher No.</b>		

CONTINUATION SHEET	Reference No. of Document Being Continued		Page 2 of 4
	PIIN/SIIN DAAE20-02-F-0047	MOD/AMD	
Name of Offeror or Contractor: GLOBAL DISTRIBUTORS INC			

SUPPLEMENTAL INFORMATION

1. This delivery order is awarded against GSA Schedule GS-28F-0025J with Global Distributors for the following items:

QTY	ITEM	DESCRIPTION	PRICE EA	TOTAL PRICE
10	3252	GRANADA ARMCHAIR FABRIC KT61 WINE	\$190.00	\$1,900.00
23	3212	GRANADA LOW BACK MULTI-TILTER FABRRIC KT61 WINE	\$189.00	\$4,347.00
1		FREIGHT CHARGE	\$129.14	129.14
			TOTAL PRICE	\$6,376.14

2. All items are to be shipped to:

TACOM - ROCK ISLAND  
AMSTA-AQ-AR WANNETTA BAKER (309)782-4905  
BUILDING 299 RECEIVING  
ROCK ISLAND, IL 61299-6930

MARK FOR: AMSTA-AQ-AR

Contract number as set forth in Block 2 of page 1 must appear on outside of shipping container and detailed packing list must be included with the shipment.

3. All terms and conditions of the listed GSA schedule are applicable to this order.

\*\*\* END OF NARRATIVE A 001 \*\*\*

Name of Offeror or Contractor: GLOBAL DISTRIBUTORS INC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	SUPPLIES OR SERVICES AND PRICES/COSTS				
0001	<u>Supplies or Services and Prices/Costs</u>				
0001AA	<u>SERVICES LINE ITEM</u>				\$ <u>6,376.14</u>
	NOUN: FURNITURE SECURITY CLASS: Unclassified PRON: M129R073M1 PRON AMD: 01 ACRN: AA AMS CD: 42212200000				
	<u>Inspection and Acceptance</u> INSPECTION: Destination ACCEPTANCE: Destination				
	<u>Deliveries or Performance</u> DLVR SCH PERFORM COMPL <u>REL CD</u> <u>QUANTITY</u> <u>DATE</u> 001 0 25-OCT-2002				
	\$ 6,376.14				

Name of Offeror or Contractor: GLOBAL DISTRIBUTORS INC

CONTRACT ADMINISTRATION DATA

								JOB		
LINE	PRON/	OBLG						ORDER	ACCOUNTING	OBLIGATED
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>				<u>NUMBER</u>	<u>STATION</u>	<u>AMOUNT</u>
0001AA	M129R073M1	AA	2	21	22020000026D6D02P422122252G	S11116		27PH07	W52H09	\$ 6,376.14
42212200000										
									TOTAL	\$ 6,376.14
SERVICE								ACCOUNTING		OBLIGATED
<u>NAME</u>	<u>TOTAL BY ACRN</u>		<u>ACCOUNTING CLASSIFICATION</u>					<u>STATION</u>		<u>AMOUNT</u>
Army	AA		21	22020000026D6D02P422122252G	S11116			W52H09	\$	6,376.14
									TOTAL	\$ 6,376.14